

## SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

## 1. Article Addressed to:

Kain Cortez  
Chad Frese, Kaplan & Frese LLP  
111 East Church Street  
Marshalltown, IA 50158



9590 9402 6618 1028 2946 03

## 2. Article Number (Transfer from service label)

7017 2400 0001 0987 9544

## COMPLETE THIS SECTION ON DELIVERY

## A. Signature

x Emma Chubb

- ☒ Agent  
☐ Addressee

## B. Received by (Printed Name)

Emma Chubb

## C. Date of Delivery

10/11/22

- D. Is delivery address different from item 1? ☐ Yes  
If YES, enter delivery address below: ☒ No

## 3. Service Type

- |                                                                        |                                                                     |
|------------------------------------------------------------------------|---------------------------------------------------------------------|
| <input type="checkbox"/> Adult Signature                               | <input type="checkbox"/> Priority Mail Express®                     |
| <input type="checkbox"/> Adult Signature Restricted Delivery           | <input type="checkbox"/> Registered Mail™                           |
| <input checked="" type="checkbox"/> Certified Mail®                    | <input type="checkbox"/> Registered Mail Restricted Delivery        |
| <input type="checkbox"/> Certified Mail Restricted Delivery            | <input type="checkbox"/> Signature Confirmation™                    |
| <input type="checkbox"/> Collect on Delivery                           | <input type="checkbox"/> Signature Confirmation Restricted Delivery |
| <input type="checkbox"/> Collect on Delivery Restricted Delivery       |                                                                     |
| <input type="checkbox"/> Insured Mail                                  |                                                                     |
| <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500) |                                                                     |

PS Form 3811, July 2020 PSN 7530-02-000-9053

Domestic Return Receipt

**Government  
Exhibit**

1

Case

22-CV-00115

# USPS Tracking®

[FAQs >](#)

Tracking Number:

Remove X

**70172400000109879544**[Copy](#)[Add to Informed Delivery](#)[\(https://informedelivery.usps.com/\)](https://informedelivery.usps.com/)

## Latest Update

Your item was delivered to the front desk, reception area, or mail room at 11:24 am on October 11, 2022 in MARSHALLTOWN, IA 50158.

Feedback

## Delivered

**Delivered, Front Desk/Reception/Mail Room**

MARSHALLTOWN, IA 50158

October 11, 2022, 11:24 am

[See All Tracking History](#)[Text & Email Updates](#)[USPS Tracking Plus®](#)[Product Information](#)[See Less ^](#)

Track Another Package